

**For Local County Health Departments Only**  
**LOCAL COUNTY PUBLIC HEALTH DEPARTMENTS**  
**VITAL STATISTICS DATA FILES APPLICATION**

Counties may obtain one copy of their own county-specific statistical master files for the current year at no charge. There is a charge for prior years.

**Confidential Files Including Personal Identifiers**

Confidential death files are those that include social security number (SSN) and mother's maiden name (MMN). Confidential birth files are those that include personal identifiers—name, certificate number, address. These fields are subject to confidentiality restrictions according to California Health and Safety Code.

Personal identifiers, including address, may be used for follow-back or contact for public health purposes only. Any other reason for follow-back or contact with human subjects must be approved by the Committee for the Protection of Human Subjects (CPHS) and the Vital Statistics Advisory Committee (VSAC). Also, the release of names or any other personal identifiers requires prior approval from CPHS and VSAC. **For more information on obtaining approvals or to request an application for the statewide data files, please contact the Health Information and Research Section at the telephone number or e-mail listed below.**

**Purchase Instructions**

- Complete the application. Indicate the specific file(s) and specific year(s) you are requesting and calculate the total cost. Complete the "Purpose and Use of Data" and "Security" sections.
- The Vital Statistics Access Agreement must be signed by the "**data user**"—the person who will be using the files; and the "**head of program**"—the principal person who will be responsible for the file(s). Print each name and title, sign, and date.

**Payment and Mailing Instructions**

Mail the completed application materials with your check or money order to:

California Department of Public Health  
Center for Health Statistics and Informatics  
Attn: HIRS  
Mail Station Code 5102  
P.O. Box 997410  
Sacramento, CA 95899-7410

FAX #: 916-650-6889  
E-mail: [OHIR@cdph.ca.gov](mailto:OHIR@cdph.ca.gov)  
Phone #: 916-552-8095

You can fax the completed application to the number listed above if no payment is required.

Make check or money order payable to California Department of Public Health if purchasing prior years of data. Payment must be received before files can be released. We DO NOT accept credit cards or send files via purchase order. If an invoice is required to process a check, please contact the Health Information and Research Section at the telephone number or email listed above.

DO NOT mail checks or money orders without a copy of the application or an invoice included. Checks sent without proper back-up may result in a significant delay in processing the request.

**Courier Deliveries**

Private courier deliveries (FedEx, DHL, etc.) are not accepted at the P.O. Box address above. If you would like to send you application via courier, please call or email for the physical delivery address.

The California Department of Public Health federal taxpayer ID number is 74-3204993.